



OFFICE OF THE ILLINOIS STATE FIRE MARSHAL
Division of Petroleum and Chemical Safety
1035 Stevenson Drive
Springfield, Illinois 62703-4259
(217)785-1020 or (217)785-5878

FOR OFFICE USE ONLY

Facility # _____

Permit# _____

APPLICATION for Permit for **ABANDONMENT-IN-PLACE** of Underground Storage Tanks at existing site. Complete in triplicate (one original and two copies), complete certification of site condition (page 3), submit a copy of a professional site assessment and file with triplicate site plans, along with an application fee of \$200.00 to: **Office of the State Fire Marshal, Division of Petroleum and Chemical Safety, 1035 Stevenson Drive, Springfield, IL 62703.**

(1) **OWNER OF TANKS** - Corporation, partnership, or other business entity: (Must be mailing address)

Name _____

Street Address _____

City _____ State _____ Zip _____

Contact Person _____ Phone _____

(2) **FACILITY** - Facility ID # _____
(Name and address where tanks are located):

Name _____

Street Address _____

City _____ State _____ Zip _____ County _____

Contact Person _____ Phone _____

(3) **CONTRACTOR**: I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that all information submitted is true, accurate and complete.

Company Name _____ Address _____

City _____ State _____ Zip _____

Telephone # _____ Fax # _____ Contractor License # IL _____ Expiration Date _____

Name of Authorized Representative _____ Title or Position _____

Signature _____ Date _____

(4) **TANK(S)**: Check whichever applies and fill in the appropriate blanks for the UST system(s) to be abandoned in place.
Attach additional sheet(s) if more space is needed.

Tank ID #	Capacity in Gallons	Product	FRP	Steel	Composite	Other	Date last used	Currently in use

The OSFM **REQUIRES** the disclosure of the requested information to issue this permit, pursuant to 430 ILCS, Act 15, Gasoline Storage Act. Failure to provide the requested information will result in this permit application not being processed. Such failure will result in the application being returned - it will be returned to the applicant only once (without being denied) and if resubmitted, is **REQUIRED** to be done within **14 days** from the date of return.

(5) **WHAT IS BEING ABANDONED?:**

- ☐ **ABANDON** Tanks _____
- ☐ **ABANDON** Piping Only _____
- ☐ **ABANDON** Tanks and Piping _____

MATERIAL BEING USED FOR FILL: _____

EXPLANATION OF WHY WAIVER IS REQUESTED - Describe where the tank(s) and/or piping are located and give the reasons why abandonment in place is necessary for each, such as loss of support to structures, streets, railroad tracks, other tanks or where it has been demonstrated that removal is infeasible. Attach additional sheet(s) if more space is needed.

(6) **SITE PLANS** - Drawings of the site must accompany the application forms. They must show the UST(s) to be abandoned in place in relation to any structures, streets, railroad tracks, other tanks or other pertinent site characteristics. Dimensions must be given from the UST to any object of concern. All objects must be named. The maximum site plan size is 8 1/2" x 11". Blueprints are not acceptable.

(7) A **CERTIFICATION OF SITE CONDITION** must be submitted on the form prescribed by the Office of the State Fire Marshal and attached to this application. This certification of site condition shall be based on a professional site assessment from soil sampling and the site assessment must accompany the site certification form.

(8) **MISCELLANEOUS:**

(a) **AUXILIARY INFORMATION** - Other supplemental information, detailed drawings or supporting documents may be necessary depending on the site characteristics and the reason for abandonment in place.

(b) **APPLICATION REJECTION** - Insufficient information or illegibility can be cause for return or denial.

(c) **PERMIT TO WORK** - No work can proceed without a granted permit in hand and the permit must be available upon request of the OSFM Storage Tank Safety Specialist.

(8) **APPLICANT** - The **RESPONSIBLE CONTRACTOR** must complete this application. A fee of **\$200.00** for each site must accompany this application. (Checks or money orders are to be made payable to the Office of the State Fire Marshal. Do not send cash).

CERTIFICATION OF SITE CONDITION

For **ABANDONMENT-IN-PLACE** of Underground Storage Tanks and/or Piping (Attach to application)
A copy of a professional site assessment must accompany this form

Facility Name _____ Address _____
City _____ State _____ Zip Code _____ Facility ID# _____

(1) Complete this section for **CLEAN SITE** and leave section (2) below blank

I certify to this Office, that each subject underground storage tank system is not currently leaking; nor has leaked in the past. The owner/operator has measured for the presence of a release where contamination is most likely to be present at each UST site in accordance with 41 Ill. Adm. Code 175.840(d)(3)(B). Each sample has met accepted standards for a determination that the site is not contaminated according to accepted practices and in the best professional judgment and diligence of a supervising Licensed Professional Engineer or Licensed Professional Geologist having experience in the field of environmental site assessments. The supervising Professional Geologist or Professional Engineer must also complete the site assessment report form required by Section 176.330(c).

Tanks involved (from item 4 of application) _____
Owner (Company Name) _____ Address _____
City _____ State _____ Zip _____
Name of Owner's Representative _____ Title or Position _____
Signature _____ Date _____

Subscribed and sworn before me this _____ Day of _____ 20_____

Notary Public

(2) Complete this section for **CONTAMINATED SITE** and leave section (1) above blank

I certify that the UST(s) to be abandoned-in-place, has soil or groundwater contamination. I have reported this to IEMA and have obtained an incident number. I agreed to remediate the site to the satisfaction of Illinois EPA and to follow all applicable State of Illinois laws and regulations.

Tanks involved (from item 4 of application) _____
IEMA Incident No. _____ Date Obtained _____
Owner (Company Name) _____ Address _____
City _____ State _____ Zip _____
Name of Owner's Representative _____ Title or Position _____
Signature _____ Date _____

Subscribed and sworn before me this _____ Day of _____ 20_____

Notary Public

The OSFM REQUIRES this certification as to whether a UST system to be abandoned-in-place is leaking, has leaked or is in contaminated soil. Pursuant to 415 ILCS, Act 5, Environmental Protection Act, the abandoned-in-place UST system is subject to corrective action requirements. Failure to complete this certification will result in the denial of the Abandonment-in-Place Permit Application for such UST system.